

Census File Number (CFN) 

FORM **NC-99500**
(8-2-2001)

U.S. DEPARTMENT OF COMMERCE
Economics and Statistics Administration
U.S. CENSUS BUREAU

OWNERSHIP OR CONTROL

A. Is your organization owned or controlled by a domestic company or does your organization operate at more than one location?

0005 ☐ Yes - *Complete lines B and C and return with your completed form NC-99023*

0006 ☐ No - *Discard this sheet (form NC-99500) and return your completed form NC-99023*

B. Ownership or control

1. Does another domestic company own more than 50 percent of the voting stock of your company or have the power to control the management and policies of your company?

Answer "No" if your company -

- Is a franchise but is not owned or operated by the franchiser.
- Operates one or more leased departments in an establishment owned by another company, but the other company (the lessor) does not own or control the departments.
- Is engaged in the management of a business owned by others.
- Rents, leases, or operates on a commission basis a facility owned by another company.

0008 ☐ Yes - *Enter the following information on the owning or controlling company* 

0009 ☐ No - *Go to line C*

0080 Name of owning or controlling company	0081 Employer Identification Number (EIN) Enter EIN of owning or controlling company (9 digits)
0082 Home office address (Number and street)	
0083 City	0084 State 0085 ZIP Code

2. Percent of voting stock owned (Mark "X" only ONE box.)

0027 ☐ Less than 50% 0028 ☐ 50% 0029 ☐ More than 50%

C. Number of establishments currently operated under the Employer Identification Number shown in the mailing address or as corrected in **1** on first page of form NC-99023

0087

2001
Number


If more than one establishment

- Provide the physical location address and other information requested on the back of this sheet for each location.
- Provide the headquarters location first, followed by all other locations. If more than 4 locations, copy the back of this sheet and continue.

For establishment not in operation at the end of 2001

- Include establishments that are temporarily or seasonally inactive.
- Exclude establishments that permanently ceased operation.

CONTINUE ON BACK

Census File Number (CFN) **C.** Number of establishments currently operated - Continued*If you have more than 4 establishments, copy this portion of the form and continue.*

0088 Name

0089 Number and street (*P.O. box and rural route addresses are not physical locations.*)**1**

0090 City, town, village, etc.

0091 State

0092 ZIP Code

0703 Describe kind of business at this location

0088 Name

0089 Number and street (*P.O. box and rural route addresses are not physical locations.*)**2**

0090 City, town, village, etc.

0091 State

0092 ZIP Code

0703 Describe kind of business at this location

0088 Name

0089 Number and street (*P.O. box and rural route addresses are not physical locations.*)**3**

0090 City, town, village, etc.

0091 State

0092 ZIP Code

0703 Describe kind of business at this location

0088 Name

0089 Number and street (*P.O. box and rural route addresses are not physical locations.*)**4**

0090 City, town, village, etc.

0091 State

0092 ZIP Code

0703 Describe kind of business at this location